

ENTRY BLANK

PLEASE TYPE OR PRINT

Entered previous May Show

☐ yes ☒ no

☐ Ms.

☒ Mr. Artist FRANK AUGUSTA JR.

(Last Name Last)

Permanent

Address 12912 OAK PARK BLVD. GARFIELD HTS.

Street

City

44125

Tel. (216) 475-6622

Zip

Area Code

Temporary or

Studio Address 2240 PROSPECT AVE. CLEVELAND

Street

City

44115

Tel. (216) 771-2475

Zip

Area Code

If you do not presently live in one of the counties of the Western Reserve, which county were you born in? _____

Collaborator _____

(If Any)

If May Show entries are not accepted or not sold:

☒ Artist will pick up at Museum.

☐ Museum should dispose of.

☐ Museum should ship to artist C.O.D. at this address: _____

Special Instructions

When necessary include below instructions or a drawing of how the object is to be assembled and displayed.

This entry blank must be fully made out and signed. Unsigned entry blanks will not be accepted.

Note carefully calendar for delivery and return of objects. It is understood that the Museum will have the right to dispose for its own account any objects not called for by the dates listed.

It is also understood that accepted objects will remain on exhibition until July 17, 1983.

The submission of objects will be construed as acceptance of all conditions printed in the entry information.

Signature Frank Augusta Jr.

DO NOT DETACH

DO NOT DETACH

ENTRY BLANKS

PLEASE FILL FREE TO CHANGE
MY CATEGORY TO GRAPHICS IF IT
BEST EXEMPLIFIES MY ART

1

- ☒ 1. Paintings ☐ 2. Graphics ☐ 3. Photography
☐ 4. Sculpture ☐ 5. Crafts

Materials

PERMANENT PIGMENT
WATERCOLORS ON
CONSTRUCTION PAPER

Title

LOVE CYCLE

pic. d. up
d. d. 7/15

Price or NFS

\$300.

Insurance Value
if NFS Only

Size

24" x 24"

GRAPHICS AND PHOTOGRAPHY ONLY

Additional No.
For Sale

Total No. in Edition

Price
UnframedPrice of
Frame

ACCEPTED

REJECTED

DO NOT WRITE IN THIS SECTION

23 (1)

ACCEPTED

REJECTED

2

- ☐ 1. Paintings ☐ 2. Graphics ☐ 3. Photography
☐ 4. Sculpture ☐ 5. Crafts

Materials

Title

Price or NFS

Insurance Value
If NFS Only

Size

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Additional No.
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ACCEPTED

REJECTED

DO NOT WRITE IN
THIS SECTION

ACCEPTED

REJECTED

RECEIVED

DATE

DETACH